



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, PACIFIC TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

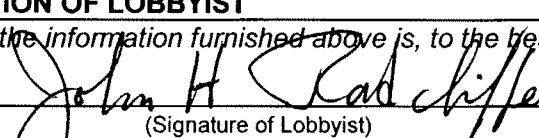
<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
RADCLIFFE	JOHN	H.	808-754-4026
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808-599-4340
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
CAPITOL CONSULTANTS OF HAWAII, LLP			808/531-4551
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	

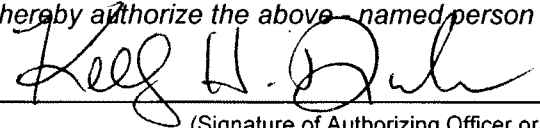
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE 800-624-2931
CORRECTIONS CORPORATION OF AMERICA		
MAILING ADDRESS (Street)		FAX 615-263-3050
10 BURTON HILLS BLVD		
(City)	(State)	(Zip Code)
NASHVILLE	TN	37215
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE 800-624-2931
KELLY DURHAM		
MAILING ADDRESS (Street)		FAX 615-263-3050
10 BURTON HILLS BLVD		

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(City)	(State)	(Zip Code)
NASHVILLE	TN	37215

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
 (Signature of Lobbyist)	22 Jan. 2007 (Date)

PART V AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
KELLY DURHAM	SENIOR DIRECTOR BUSINESS DEVELOPMENT
NAME OF ORGANIZATION (if applicable)	TELEPHONE 800-624-2931
CORRECTIONS CORPORATION OF AMERICA	
MAILING ADDRESS (Street)	FAX 615-263-3050
10 BURTON HILLS BLVD	
(City)	(State)
NASHVILLE	TN
(Zip Code)	
	37215
I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.	
 (Signature of Authorizing Officer or Person Represented)	1-22-07 (Date)